AUG 0 6 200	nd this form, toget	ner waa appiicabi	,,,	Maii Stop 188 Commissioner P.O. Box 1450 Alexandria, V (571)-273-2885	for Patei irginia 22		/		
NSTRECTIONS: This appropriate All further indicated industrial maintenance fee notifica	should be used for the spondence including delow or directed other tions.	or transmitting the ISS g the Patent, advance of the erwise in Block 1, by (
CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.								
MEDLEN & C 101 HOWARD SUITE 350	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.								
SAN FRANCIS /07/2007 WASFAW2 0	Cliff Cannon-Cin (Depositor's name)								
FC:1501		August 3, 2007 (Date)							
FC:1504	1400.00 300.00	OP .				August	3, 2007	(Date)	
APPLICATION NO.	FILING DATE	UP	FIRST NAMED INVEN	ror	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
	08/27/2003 : PLUS END-DIRECTE			R CHROMOSOM	E CONGRE	· · · · · · · · · · · · · · · · · · ·	6632		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D		SSUE FEE	TOTAL FEE(S) DUE	DATE E		
nonprovisional	NO	\$1400	\$300	. \$0		\$1700	09/28/2	:007	
EXAMINER		ART UNIT	CLASS-SUBCLASS						
HOLLERA	<u> </u>	1643	435-004000			· · · · · · · · · · · · · · · · · · ·			
CFR 1.363). Change of corresp Address form PTO/S1 "Fee Address" ind	ondence address or indication ondence address (or Cha B/122) attached. ication (or "Fee Address' 22 or more recent) attach	or agents OR, alten (2) the name of a s registered attorney 2 registered patent	names of up to 3 registered patent attorneys tast OR, alternatively, name of a single firm (having as a member a red attorney or agent) and the names of up to tered patent attorneys or agents. If no name is no name will be printed. Medlen & Carroll, LLP						
	ND RESIDENCE DATA		**	• • •				~	
PLEASE NOTE: Uni recordation as set fort	less an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NC	data will appear on the official of the official	e patent. If an ass an assignment.	signee is ide	entified below, the do	cument has bee	in filed to	
• •	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
The Regents of the University of California Oakland, California									
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	☐ Individual 区	Corporatio	on or other private gro	up entity 🔲 G	overnmen	
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Solution Solution									
	tus (from status indicated		·				 		
NOTE: The Issue Fee an	s SMALL ENTITY statu d Publication Fee (if requestroords of the United Sta	nired) will not be accepte	b. Applicant is no					ner party in	
Authorized Signature	M. + 1	V. Cul J	U.	Date	Augu	ıst 3, 2007			
Typed or printed name Christine A. Lekutis				Registratio	on No	51934			
in application. Confiden submitting the completed his form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 1 application form to the ons for reducing this but (irginia 22313-1450. DO 13-1450. duction Act of 1995, no page 1995	U.S.C. 122 and 37 CFR USPTO. Time will varden, should be sent to the NOT SEND FEES OR	1.14. This collection is y depending upon the in ne Chief Information Of COMPLETED FORMS	estimated to take adividual case. An ficer, U.S. Patent a S TO THIS ADDR	12 minutes to y comments and Tradema ESS. SEND	to complete, including on the amount of tin ark Office, U.S. Depa TO: Commissioner f	g gathering, prepose you require to the street of Common Patents, P.O.	paring, and o complete nerce, P.O	
•			· .						